

IMCO Recycling of Idaho, Inc.
Facility ID No. 055-00031

Change in Hourly (lb/hr) and Annual (T/yr) Emission Limits

Source Description	PM		PM10		NOx		SOx		CO		VOC		Fluoride		HCl	
	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr
Furnace No. 1 (Hearth Stack No. 1)	-4.10	-12.58	-1.20	-3.80	-3.70	-11.69	-0.75	-3.29	-0.90	-2.82	-1.00	-4.38	0.00	0.00	0.00	0.00
Furnace No. 2 (Hearth Stack No. 2)	-4.10	-12.58	-1.20	-3.80	-3.70	-11.69	-0.75	-3.29	-0.90	-2.82	-1.00	-4.38	0.00	0.00	0.00	0.00
Melting/Delacquering (Baghouse Stack No. 4)	-6.16	-18.43	-6.16	-18.43	0.00	0.00	0.00	0.00	0.00	0.00	-3.00	-13.14	-1.00	-4.03	-0.50	-2.19
Saltcake Staging Baghouse (SKSGB5)																
(Stack No. 5)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Rotary Furnace Baghouse (RFB6)																
(Stack No. 6)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00	8.79	0.00	0.00	0.00	0.00
Holding Furnace (Stack No. 7)	-1.50	-6.57	-1.50	-6.57	-1.30	-4.03	-1.25	-6.84	-1.00	-4.38	-1.40	-6.13	0.00	0.00	0.00	0.00
Shredder Baghouse (Stack No. 8)	-2.50	-10.08	-2.50	-10.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Delacquering Baghouse (Stack No. 9)	-7.70	-21.92	-7.70	-21.92	-1.60	-4.84	-0.50	-2.19	-0.50	-1.21	-1.00	-4.38	0.00	0.00	-1.93	-5.50
Total Changes:	-26.06	-82.16	-20.26	-64.60	-10.30	-32.25	-3.25	-15.61	-3.30	-11.23	-5.40	-23.62	-1.00	-4.03	-2.43	-7.69



DEQ AIR QUALITY PROGRAM
 1410 N. Hilton
 Boise, ID 83706
 For assistance: 208-373-0502

PERMIT TO CONSTRUCT APPLICATION

Applicants, please see instructions on page 2 before filling out the form.

DEQ Staff, please see instructions for handling this form on page 3.

COMPANY NAME, FACILITY NAME, AND FACILITY ID NUMBER			
1. Company Name	Imsamet, Inc.		
2. Facility Name	IMCO Recycling of Idaho, Inc.	3. Facility ID No.	055-00031
4. Brief Project Description - One sentence or less	Aluminum Recycling and Dross Recovery Facility		
PERMIT APPLICATION TYPE			
5. <input type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input type="checkbox"/> Unpermitted Existing Source <input checked="" type="checkbox"/> Modify Existing Source: Permit No.: <u>055-00031</u> Date Issued: <u>June 4, 2002</u> <input type="checkbox"/> Required by Enforcement Action: Case No.: _____			
6. <input checked="" type="checkbox"/> Minor PTC <input type="checkbox"/> Major PTC			
FORMS INCLUDED			
Included	N/A	Forms	DEQ Verify
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form GI - Facility Information	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form EU0 - Emissions Units General	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU1 - Industrial Engine Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU2 - Nonmetallic Mineral Processing Plants Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU3 - Spray Paint Booth Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU4 - Cooling Tower Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU5 - Boiler Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form HMAP - Hot Mix Asphalt Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form CBP - Concrete Batch Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form BCE - Baghouses Control Equipment	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form SCE - Scrubbers Control Equipment	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Forms EI-CP1-EI-CP4 - Emissions Inventory- criteria pollutants (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	PP - Plot Plan	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Forms MI1-MI4 - Modeling (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form FRA - Federal Regulation Applicability	<input type="checkbox"/>

DEQ USE ONLY
Date Received
Project Number
Payment / Fees Included? Yes <input type="checkbox"/> No <input type="checkbox"/>
Check Number

Instructions for Form CS - Applicants

This form acts as a cover sheet for the Permit to Construct application, providing DEQ with basic information regarding the company and the proposed permitting action. This form helps DEQ efficiently determine whether the application is administratively complete. This form also provides the applicant with a list of forms available to aid the applicant to successfully submit a complete application.

Company Name, Facility Name, and Facility ID Number

- 1-3. Provide the name of your company, the name of the facility (if different than company name), and the facility identification (ID) number (Facility ID No.) in the boxes provided. The facility ID number is also known as the AIRS number or AIRS/AFS number (example: 095-00077). If you already have a permit, the facility ID number is located in the upper right hand corner of the cover page. The facility ID number must be provided unless your facility has not received one, in which case you may leave this box empty. **Use these same names and (ID) number on all forms.** This is useful in case any pages of the application are separated.
4. Provide a brief description of this permitting project in one sentence or less. Examples might be "Install/construct a new boiler" or "Increase the allowable process throughput." **This description will be used by DEQ as a unique identifier for this permitting project, in conjunction with the name(s) and ID number referenced in 1-3.** You will need to put this description, using the exact same words, on all other forms that are part of this project application. This is useful in case any pages of the application are separated.

Permit Application Type

5. Provide the reason you're submitting the permit application by checking the appropriate box (e.g., a new facility being constructed, a new source being constructed at an existing facility, an unpermitted existing source (as-built) applying for a permit for the first time, a permitted source to be modified, or the permit application is the result of an enforcement action, in which case provide the case number). If you are modifying an existing permitted source, provide the number and issue date of the most recent permit.
6. Indicate if the application is a minor permit to construct application or a major permit to construct application by checking the appropriate box (e.g., major PTC or minor PTC). If the permit to construct application is for a major new source or major modification, you must ensure that all necessary information required by IDAPA 58.01.01.202, and .204, or .205, as applicable, is provided.

Forms Included

Check the "Included" box for each form included in this permit to construct application. If there are multiples of a form for multiple units of that type, check the box and fill in the number of forms in the blank provided.

The "N/A" box should only be checked if the form is absolutely unnecessary to complete the application. Additional information may be requested.

When complete, submit all application forms and any required fees to:

Air Quality Program Office – Application Processing
Department of Environmental Quality
1410 N. Hilton
Boise, ID 83706-1255

Instructions for Form CS – DEQ Staff

This form acts as a cover sheet for the Permit to Construct application, providing DEQ with basic information regarding the company and the proposed permitting action, and as an internal tool for DEQ to verify that the application is administratively complete.

Company Name, Facility Name, and Facility ID Number

- 1-3. Verify that company's name, facility name, and facility identification (ID) number are provided, are complete and correct, and are consistent with DEQ's naming/numbering convention(s). If the facility has not previously received a facility ID number, a facility ID number will be assigned.

Project Description and Application Type

- 4-6. Verify that the brief project description (one sentence or less) coincides with the application type.

Forms Included

Please verify that all forms checked as "Included" were provided with the permit application, as follows:

- For each form that is checked as "Included" and is actually included in the permit application, check the "DEQ Verification" box.
- Verify that the permit to construct application fee was submitted at the time the application was submitted by checking the appropriate box. If the application fee was not submitted with the permit to construct application, the application is administratively incomplete and must be returned to the applicant.
- All applicable forms shall be present for the permit application to be determined administratively complete.

This is to determine *administrative completeness* only. A thorough technical review will be completed by either the permit writer or permit coordinator for *technical completeness*.

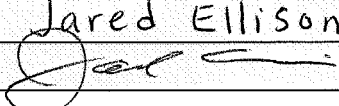


DEQ AIR QUALITY PROGRAM
1410 N. Hilton
Boise, ID 83706
For assistance: (208) 373-0502

PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

All information is required. If information is missing, the application will not be processed.

IDENTIFICATION	
1. Company Name	Imsamet, Inc.
2. Facility Name (if different than #1)	IMCO Recycling of Idaho, Inc.
3. Facility I.D. No.	055-00031
4. Brief Project Description:	Aluminum recycling and dross recovery facility
FACILITY INFORMATION	
5. Owned/operated by: (✓ if applicable)	<input type="checkbox"/> Federal government <input type="checkbox"/> County government <input type="checkbox"/> State government <input type="checkbox"/> City government
6. Primary Facility Permit Contact Person/Title	Jared Ellison
7. Telephone Number and Email Address	208.773.1527 jared.ellison@aleris.com
8. Alternate Facility Contact Person/Title	Max Bertram
9. Telephone Number and Email Address	865.354.6376 max.bertram@aleris.com
10. Address to which permit should be sent	West 4000 Prairie Avenue
11. City/State/Zip	Post Falls, Idaho 83854
12. Equipment Location Address (if different than #9)	
13. City/State/Zip	
14. Is the Equipment Portable?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. SIC Code and NAISC Code	SIC: 3341 Secondary SIC (if any): NAICS: 331314
16. Brief Business Description and Principal Product	Secondary aluminum production of recycled scrap ingots (RSI) by melting and recovering aluminum from aluminum scrap and dross.
17. Identify any adjacent or contiguous facility that this company owns and/or operates	None
PERMIT APPLICATION TYPE	
18. Specify Reason for Application	<input type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input checked="" type="checkbox"/> Modify Existing Source: Permit No.: 055-00031 Date Issued: June 4, 2002 <input type="checkbox"/> Unpermitted Existing Source: <input type="checkbox"/> Required by Enforcement Action: Case No.:
CERTIFICATION	
IN ACCORDANCE WITH IDAPA 58.01.01.123 (RULES FOR THE CONTROL OF AIR POLLUTION IN IDAHO), I CERTIFY BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION IN THE DOCUMENT ARE TRUE, ACCURATE, AND COMPLETE.	
19. Responsible Official's Name/Title	Jared Ellison - Plant Manager
20. RESPONSIBLE OFFICIAL SIGNATURE	 Date: 1-11-07

Instructions for Form GI

This form is used by DEQ to identify a company or facility, equipment locations, and personnel involved with the permit application. Additional information may be requested.

- 1 – 4. Please fill in the same company name, facility name (if different), facility ID number, and brief project description as on Form CS. This is useful in case any pages of the application are separated.
5. Indicate whether the facility is owned by a government entity.
6. Name of the primary person who should be contacted regarding this permit.
7. Telephone number and e-mail address of person listed in 5.
8. Name of the person who should be contacted if the person listed in 5 is not available.
9. Telephone number and e-mail address of person listed in 8.
- 10-11. Address to which DEQ should mail the permit.
- 12-13. Physical address at which the equipment is located (if different than 10).
14. If the equipment is portable (such as an asphalt plant), identify by marking "yes." If there are other locations the portable equipment will be used, attach a Portable Equipment Relocation Form (PERF) to list those locations. The PERF form can be accessed at http://www.deq.idaho.gov/air/permits_forms/forms/ptc_relocation.pdf.
15. Provide the Standard Industrial Classification (SIC) code and the North American Industry Classification System (NAICS) code for your plant. NAICS codes can be found at <http://www.census.gov/epcd/naics02/naicod02.htm>. If a secondary SIC code is applicable, provide it also. If your plant includes more than one major activity, provide the one related with the permit application. These codes are a compilation by the federal government of businesses by type of activity SIC codes are intended to cover the entire field of economic activity while NAICS codes are specific to the activity performed at the facility.
16. Briefly describe the primary activity and principal product of your business. If your plant includes more than one major activity, describe the one related with the permit application.
17. Please indicate if there are any other branches or divisions of this company located within 5 miles of the address provided in 12 above on this form.
18. Check the box which describes the type of permit application or "other" and briefly describe.
- 19-20. Fill in the certification section with a signature, name, title and date. The certification must be signed by a responsible official (as defined in IDAPA 58.01.01.006.83) in accordance with IDAPA 58.01.01.123.



DEQ AIR QUALITY PROGRAM
1410 N. Hilton
Boise, ID 83706
For assistance: (208) 373-0502

PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION							
Company Name: Imsamet, Inc.		Facility Name: IMCO Recycling of Idaho, Inc.			Facility ID No: 055-00031		
Brief Project Description:		Aluminum recycling and dross recovery facility					
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION							
1. Emissions Unit (EU) Name:		ROTARY FURNACE #1					
2. EU ID Number:		RF3					
3. EU Type:		<input type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input checked="" type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:055-00031 Date Issued: June 4, 2002					
4. Manufacturer:		IMSAMET OF IDAHO					
5. Model:		NOT AVAILABLE					
6. Maximum Capacity:		300,000 LBS FEED CHARGE PER DAY					
7. Date of Construction:		1999					
8. Date of Modification (if any)		NONE					
9. Is this a Controlled Emission Unit?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT							
10. Control Equipment Name and ID:		Rotary Furnace Baghouse (RFB6)					
11. Date of Installation:		1989	12. Date of Modification (if any):		None		
13. Manufacturer and Model Number:		Carborundum, Ct-2					
14. ID(s) of Emission Unit Controlled:		RF3 and RF5					
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
Control Efficiency		Pollutant Controlled					
		PM	PM10	SO ₂	NOx	VOC	CO
		99	99	0	0	0	0
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Information provided in prior permit applications							
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)							
18. Actual Operation		24 HRS PER DAY					
19. Maximum Operation		24 HRS PER DAY					
REQUESTED LIMITS							
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):							
<input type="checkbox"/> Production Limit(s):							
<input type="checkbox"/> Material Usage Limit(s):							
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports					
<input checked="" type="checkbox"/> Other:		SEE ATTACHMENT 2					
21. Rationale for Requesting the Limit(s):		LIMITS ARE CONSISTENT WITH PRIOR PERMIT					

Instructions for Form EU0

This form provides DEQ with information about an emissions unit. An emissions unit is the equipment or process that generates emissions of regulated air pollutant(s). This form is used by the permit writer to become familiar with the emissions unit (EU). This form is also used by DEQ to identify the control equipment and the emission point (stack or vent) used for the emission unit(s) proposed in this permit application. This form also asks for supporting documents to verify stated control efficiencies and details about the emission point. Additional information may be requested.

Please put the same company name, facility name (if different), facility ID number, and brief project description as on Form CS in the boxes provided. This is useful in case any pages of the application get separated.

1. Provide the name of the emissions unit (EU), such as "Union boiler," etc. Use the exact same name for this EU throughout all the application forms. A separate EU0 form is required for each emissions unit.
2. Provide the identification (ID) number of the EU. It can be any unique identifier you choose; however, this ID number should be unique to this EU and should be used consistently throughout this application and all other air quality permit applications (e.g., operating permit application) to identify this EU.
3. Indicate the type of EU by checking the appropriate box (e.g., a new source to be constructed, an unpermitted existing source (as-built) applying for the first time, or an existing permitted source to be modified). If the EU is being modified, indicate on the form the most recent permit issued for the EU.
4. Provide the manufacturer's name for the EU. If the EU is custom-designed or homemade, indicate so.
5. Provide the model number of the EU. If the EU is custom-designed or homemade, indicate so.
6. Provide the maximum capacity of the EU. For example, a boiler's capacity may be in MMBtu/hr in terms of heat input of natural gas; an assembly line capacity may be in parts produced per day. Capacity should be based on a rated nameplate or as stated in the manufacturer's literature.
7. The date of construction is the month, day, and year in which construction or modification was commenced.

Definitions:

Construction fabrication, erection, or installation of an affected facility.

Commenced an owner or operator has undertaken a continuous program of construction or modification or that an owner or operator has entered into a contractual obligation to undertake and complete, within a reasonable time, a continuous program of construction or modification.

Modification any physical change in, or change in the method of operation of, an existing facility which increases the amount of any air pollutant (to which a standard applies) emitted to the atmosphere by that facility or which results in the emission of any air pollutant (to which a standard applies) to the atmosphere not previously emitted.

8. If the EU has been or will be modified, provide the month, day, and year of the most recent or future modification as defined in IDAPA 58.01.01.006.55.
9. Indicate if emissions from the EU are controlled by air pollution control equipment. If the answer is yes, complete the next section. If the answer is no, go to line 18.
10. Provide the name of the air pollution control equipment (e.g., wet scrubber) and the control equipment's identification number. This identification number should be unique to this air pollution control equipment and should be used consistently throughout this and all other air quality permit applications (e.g., operating permit application) to identify this air pollution control equipment.

11. Provide the date the air pollution control equipment was installed.
12. If the air pollution control equipment has been modified, provide the date of the modification.
13. Provide the name of the manufacturer and the model number for the air pollution control equipment.
14. If this air pollution control equipment controls emissions from more than this EU, provide the identification number(s) of the other EU(s).
15. Indicate if this air pollution control equipment operates on a schedule different from the EU(s) it controls.
16. Indicate if the air pollution control manufacturer guarantees the control efficiency of the control equipment. If the answer is yes, attach the manufacturer's guarantee and label it with the air pollution control equipment identification number. Indicate the control efficiency for the target pollutant(s).
17. If the control efficiency of the air pollution control equipment is not guaranteed, attach the design specifications and any performance data to support the control efficiency stated in part 16. Label the supporting documentation with the air pollution control equipment identification number.
18. Provide the projected actual operating schedule for the emission unit in hours/day, hours/year, or other.
19. Provide the maximum operating schedule for the emission unit in hours/day, hours/year, or other.
20. If you are requesting to have limits placed on this EU, mark "Yes." Then, check the applicable requested limit(s) and provide the limit(s). For example, production limits may be in terms of parts produced per year, material usage limits may be in gallons per day.
21. Please provide the reason you are requesting limits, if any. This helps DEQ and the applicant determine whether the limits are necessary, and if they will accomplish the desired purpose. Provide supporting documentation (calculations, modeling assessment, regulatory review, etc.) for each limit requested.



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1410 N. Hilton
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For assistance: (208) 373-0502

PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION							
Company Name: Imsamet, Inc.		Facility Name: IMCO Recycling of Idaho, Inc.			Facility ID No: 055-00031		
Brief Project Description:		Aluminum recycling and dross recovery facility					
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION							
1. Emissions Unit (EU) Name:		ROTARY FURNACE #2					
2. EU ID Number:		RF5					
3. EU Type:		<input type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input checked="" type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:055-00031 Date Issued: June 4, 2002					
4. Manufacturer:		IMSAMET OF IDAHO					
5. Model:		NOT AVAILABLE					
6. Maximum Capacity:		180,000 LBS FEED CHARGE PER DAY					
7. Date of Construction:		1989					
8. Date of Modification (if any)		NONE					
9. Is this a Controlled Emission Unit?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT							
10. Control Equipment Name and ID:		Rotary Furnace Baghouse (RFB6)					
11. Date of Installation:		1989	12. Date of Modification (if any):		None		
13. Manufacturer and Model Number:		Carborundum, Ct-2					
14. ID(s) of Emission Unit Controlled:		RF3 and RF5					
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
Control Efficiency		Pollutant Controlled					
		PM	PM10	SO ₂	NO _x	VOC	CO
		99	99	0	0	0	0
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Information provided in prior permit applications							
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)							
18. Actual Operation		24 HRS PER DAY					
19. Maximum Operation		24 HRS PER DAY					
REQUESTED LIMITS							
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):							
<input type="checkbox"/> Production Limit(s):							
<input type="checkbox"/> Material Usage Limit(s):							
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports					
<input checked="" type="checkbox"/> Other:		SEE ATTACHMENT 2					
21. Rationale for Requesting the Limit(s):		LIMITS ARE CONSISTENT WITH PRIOR PERMIT					

Instructions for Form EU0

This form provides DEQ with information about an emissions unit. An emissions unit is the equipment or process that generates emissions of regulated air pollutant(s). This form is used by the permit writer to become familiar with the emissions unit (EU). This form is also used by DEQ to identify the control equipment and the emission point (stack or vent) used for the emission unit(s) proposed in this permit application. This form also asks for supporting documents to verify stated control efficiencies and details about the emission point. Additional information may be requested.

Please put the same company name, facility name (if different), facility ID number, and brief project description as on Form CS in the boxes provided. This is useful in case any pages of the application get separated.

1. Provide the name of the emissions unit (EU), such as "Union boiler," etc. Use the exact same name for this EU throughout all the application forms. A separate EU0 form is required for each emissions unit.
2. Provide the identification (ID) number of the EU. It can be any unique identifier you choose; however, this ID number should be unique to this EU and should be used consistently throughout this application and all other air quality permit applications (e.g., operating permit application) to identify this EU.
3. Indicate the type of EU by checking the appropriate box (e.g., a new source to be constructed, an unpermitted existing source (as-built) applying for the first time, or an existing permitted source to be modified). If the EU is being modified, indicate on the form the most recent permit issued for the EU.
4. Provide the manufacturer's name for the EU. If the EU is custom-designed or homemade, indicate so.
5. Provide the model number of the EU. If the EU is custom-designed or homemade, indicate so.
6. Provide the maximum capacity of the EU. For example, a boiler's capacity may be in MMBtu/hr in terms of heat input of natural gas; an assembly line capacity may be in parts produced per day. Capacity should be based on a rated nameplate or as stated in the manufacturer's literature.
7. The date of construction is the month, day, and year in which construction or modification was commenced.

Definitions:

Construction fabrication, erection, or installation of an affected facility.

Commenced an owner or operator has undertaken a continuous program of construction or modification or that an owner or operator has entered into a contractual obligation to undertake and complete, within a reasonable time, a continuous program of construction or modification.

Modification any physical change in, or change in the method of operation of, an existing facility which increases the amount of any air pollutant (to which a standard applies) emitted to the atmosphere by that facility or which results in the emission of any air pollutant (to which a standard applies) to the atmosphere not previously emitted.

8. If the EU has been or will be modified, provide the month, day, and year of the most recent or future modification as defined in IDAPA 58.01.01.006.55.
9. Indicate if emissions from the EU are controlled by air pollution control equipment. If the answer is yes, complete the next section. If the answer is no, go to line 18.
10. Provide the name of the air pollution control equipment (e.g., wet scrubber) and the control equipment's identification number. This identification number should be unique to this air pollution control equipment and should be used consistently throughout this and all other air quality permit applications (e.g., operating permit application) to identify this air pollution control equipment.

11. Provide the date the air pollution control equipment was installed.
12. If the air pollution control equipment has been modified, provide the date of the modification.
13. Provide the name of the manufacturer and the model number for the air pollution control equipment.
14. If this air pollution control equipment controls emissions from more than this EU, provide the identification number(s) of the other EU(s).
15. Indicate if this air pollution control equipment operates on a schedule different from the EU(s) it controls.
16. Indicate if the air pollution control manufacturer guarantees the control efficiency of the control equipment. If the answer is yes, attach the manufacturer's guarantee and label it with the air pollution control equipment identification number. Indicate the control efficiency for the target pollutant(s).
17. If the control efficiency of the air pollution control equipment is not guaranteed, attach the design specifications and any performance data to support the control efficiency stated in part 16. Label the supporting documentation with the air pollution control equipment identification number.
18. Provide the projected actual operating schedule for the emission unit in hours/day, hours/year, or other.
19. Provide the maximum operating schedule for the emission unit in hours/day, hours/year, or other.
20. If you are requesting to have limits placed on this EU, mark "Yes." Then, check the applicable requested limit(s) and provide the limit(s). For example, production limits may be in terms of parts produced per year, material usage limits may be in gallons per day.
21. Please provide the reason you are requesting limits, if any. This helps DEQ and the applicant determine whether the limits are necessary, and if they will accomplish the desired purpose. Provide supporting documentation (calculations, modeling assessment, regulatory review, etc.) for each limit requested.



DEQ AIR QUALITY PROGRAM
1410 N. Hilton
Boise, ID 83706
For assistance: (208) 373-0502

PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION							
Company Name: Imsamet, Inc.		Facility Name: IMCO Recycling of Idaho, Inc.		Facility ID No: 055-00031			
Brief Project Description:		Aluminum recycling and dross recovery facility					
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION							
1. Emissions Unit (EU) Name:		SALTCAKE STAGING					
2. EU ID Number:		SKSG					
3. EU Type:		<input type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input checked="" type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:055-00031 Date Issued: June 4, 2002					
4. Manufacturer:		NOT APPLICABLE					
5. Model:		NOT APPLICABLE					
6. Maximum Capacity:		200,000 LBS PER DAY					
7. Date of Construction:		1999					
8. Date of Modification (if any)		NONE					
9. Is this a Controlled Emission Unit?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT							
10. Control Equipment Name and ID:		Saltcake Staging Baghouse (SKSGB5)					
11. Date of Installation:		1994	12. Date of Modification (if any):		None		
13. Manufacturer and Model Number:		ICA					
14. ID(s) of Emission Unit Controlled:		SKSG					
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
Control Efficiency		Pollutant Controlled					
		PM	PM10	SO ₂	NOx	VOC	CO
		99	99	0	0	0	0
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Information provided in prior permit applications							
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)							
18. Actual Operation		24 HRS PER DAY					
19. Maximum Operation		24 HRS PER DAY					
REQUESTED LIMITS							
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):							
<input type="checkbox"/> Production Limit(s):							
<input type="checkbox"/> Material Usage Limit(s):							
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports					
<input checked="" type="checkbox"/> Other:		SEE ATTACHMENT 2					
21. Rationale for Requesting the Limit(s):		LIMITS ARE CONSISTENT WITH PRIOR PERMIT					

Instructions for Form EU0

This form provides DEQ with information about an emissions unit. An emissions unit is the equipment or process that generates emissions of regulated air pollutant(s). This form is used by the permit writer to become familiar with the emissions unit (EU). This form is also used by DEQ to identify the control equipment and the emission point (stack or vent) used for the emission unit(s) proposed in this permit application. This form also asks for supporting documents to verify stated control efficiencies and details about the emission point. Additional information may be requested.

Please put the same company name, facility name (if different), facility ID number, and brief project description as on Form CS in the boxes provided. This is useful in case any pages of the application get separated.

1. Provide the name of the emissions unit (EU), such as "Union boiler," etc. Use the exact same name for this EU throughout all the application forms. A separate EU0 form is required for each emissions unit.
2. Provide the identification (ID) number of the EU. It can be any unique identifier you choose; however, this ID number should be unique to this EU and should be used consistently throughout this application and all other air quality permit applications (e.g., operating permit application) to identify this EU.
3. Indicate the type of EU by checking the appropriate box (e.g., a new source to be constructed, an unpermitted existing source (as-built) applying for the first time, or an existing permitted source to be modified). If the EU is being modified, indicate on the form the most recent permit issued for the EU.
4. Provide the manufacturer's name for the EU. If the EU is custom-designed or homemade, indicate so.
5. Provide the model number of the EU. If the EU is custom-designed or homemade, indicate so.
6. Provide the maximum capacity of the EU. For example, a boiler's capacity may be in MMBtu/hr in terms of heat input of natural gas; an assembly line capacity may be in parts produced per day. Capacity should be based on a rated nameplate or as stated in the manufacturer's literature.
7. The date of construction is the month, day, and year in which construction or modification was commenced.

Definitions:

Construction fabrication, erection, or installation of an affected facility.

Commenced an owner or operator has undertaken a continuous program of construction or modification or that an owner or operator has entered into a contractual obligation to undertake and complete, within a reasonable time, a continuous program of construction or modification.

Modification any physical change in, or change in the method of operation of, an existing facility which increases the amount of any air pollutant (to which a standard applies) emitted to the atmosphere by that facility or which results in the emission of any air pollutant (to which a standard applies) to the atmosphere not previously emitted.

8. If the EU has been or will be modified, provide the month, day, and year of the most recent or future modification as defined in IDAPA 58.01.01.006.55.
9. Indicate if emissions from the EU are controlled by air pollution control equipment. If the answer is yes, complete the next section. If the answer is no, go to line 18.
10. Provide the name of the air pollution control equipment (e.g., wet scrubber) and the control equipment's identification number. This identification number should be unique to this air pollution control equipment and should be used consistently throughout this and all other air quality permit applications (e.g., operating permit application) to identify this air pollution control equipment.

11. Provide the date the air pollution control equipment was installed.
12. If the air pollution control equipment has been modified, provide the date of the modification.
13. Provide the name of the manufacturer and the model number for the air pollution control equipment.
14. If this air pollution control equipment controls emissions from more than this EU, provide the identification number(s) of the other EU(s).
15. Indicate if this air pollution control equipment operates on a schedule different from the EU(s) it controls.
16. Indicate if the air pollution control manufacturer guarantees the control efficiency of the control equipment. If the answer is yes, attach the manufacturer's guarantee and label it with the air pollution control equipment identification number. Indicate the control efficiency for the target pollutant(s).
17. If the control efficiency of the air pollution control equipment is not guaranteed, attach the design specifications and any performance data to support the control efficiency stated in part 16. Label the supporting documentation with the air pollution control equipment identification number.
18. Provide the projected actual operating schedule for the emission unit in hours/day, hours/year, or other.
19. Provide the maximum operating schedule for the emission unit in hours/day, hours/year, or other.
20. If you are requesting to have limits placed on this EU, mark "Yes." Then, check the applicable requested limit(s) and provide the limit(s). For example, production limits may be in terms of parts produced per year, material usage limits may be in gallons per day.
21. Please provide the reason you are requesting limits, if any. This helps DEQ and the applicant determine whether the limits are necessary, and if they will accomplish the desired purpose. Provide supporting documentation (calculations, modeling assessment, regulatory review, etc.) for each limit requested.